

ECS Configuration Change Request

Page 1 of 1 Pages

CCR No. 96-0283		Logged Date 3/19/96		Rev.		Request Type CCR			
Priority Routine <input type="checkbox"/>		Urgent <input checked="" type="checkbox"/>		Emergency <input type="checkbox"/>		Affected Release A		Change Class II	
Title Sun Workstation Monitor and Network Access for HTG On-site Representative									
Documents Affected N/A						Source Nos (RID, NCR, etc.) or Tech Reference			
RTM Change <input type="checkbox"/> Start New Baseline <input type="checkbox"/>									
Problem HTG's XRP II System has been selected as the MSS baseline management tool and is to be implemented in Release A. The Release A development organization has procured on-site technical support from HTG, and their representative (Mr. Dean DePue) will be on-site during the period 18 March - 10 May 1996. He will be using an HTG SunStation 20 and tape drive, but requires a monitor and a network connection. He will be sharing office 2038A.									
Proposed Solution Provide a Sun monitor for Mr DePue to use for the duration of his stay, and connect his workstation to the network.									
Impact Analysis: Organizations Affected: BOO <input type="checkbox"/> Contracts <input type="checkbox"/> ESO <input type="checkbox"/> FOS <input type="checkbox"/> M&O <input checked="" type="checkbox"/> QA <input type="checkbox"/> Rel. A <input checked="" type="checkbox"/> Rel. B <input type="checkbox"/> Rel. IR1 <input type="checkbox"/> MRS <input type="checkbox"/> SMO <input type="checkbox"/> Subconts <input type="checkbox"/> Other _____ Cost: None <input checked="" type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> (Not exceeding \$100,000) (\$100,000 to \$500,000) (Over \$500,000) Schedule: None <input checked="" type="checkbox"/> Other _____ Additional LOC _____ Man-Months _____ Materials _____									
Originator A. Schuster _____ Signature _____ Date _____									
Office Rel A/MSS Office Manager _____ Signature _____ Date _____									
Disposition Approved <input type="checkbox"/> Approved w/Comment <input type="checkbox"/> Forward <input type="checkbox"/> Disapproved <input type="checkbox"/> Comments: HTSC to implement - Approved 3/19 CCB Chairperson _____ Signature _____ Date _____									

